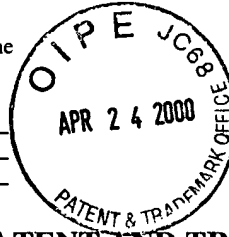


GP16428

Docket No.: PF-0229-1 DIV

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on April 18, 2000
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Hillman et al.

Title: NOVEL HUMAN MITOCHONDRIAL MEMBRANE PROTEIN

Serial No.: 09/208,619

Filing Date: December 8, 1998

Examiner: Harris, A.

Group Art Unit: 1642

Assistant Commissioner for Patents
Washington, D.C. 20231

AMENDMENT TRANSMITTAL FEE SHEET

Sir:

Transmitted herewith are the following for the above-identified application:

1. Return Postcard;
2. Response to Restriction Requirement (8 pp., in duplicate); and
3. Revocation and Power of Attorney (2 pp.).

The fee has been calculated as shown below.

Claims	Claims After Amendment	-	Claims Previously Paid For	=	Present Extra	Other Than Small Entity Rate Fee	Additional Fee(s)
Total Claims	25	-	20	=	5	\$18	\$90
Indep. Claims	2	-	3	=	0	\$78	\$0
___ First Presentation of Multiple Dependent Claim						+\$260	\$0

TOTAL \$ 90.00

___ Fee for Request for Extension of Time (___ months) \$ ___
X Please charge Deposit Account No. 09-0108 the amount of \$ 90.00

The Commissioner is hereby authorized to charge any additional fees required under 37 CFR 1.16 and 1.17, or credit overpayment to Deposit Account No. **09-0108**. **A duplicate copy of this sheet is enclosed.**

Respectfully submitted,
INCYTE PHARMACEUTICALS, INC.

Date: 4/18/00

Peng Ben Wang
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